

EXHIBIT A

SFC.29372

**IN THE UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF TEXAS
DALLAS DIVISION**

DFWS, LLC,
Plaintiff,

VS.

STATE FARM LLOYDS,
Defendant.

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§

CIVIL ACTION NO. _____

INDEX OF DOCUMENTS

EXHIBIT	DESCRIPTION
A.	Index of Documents Being Filed
B.	Docket Sheet in the 162 nd District Court (state court) Action
C.	Plaintiff's Original Petition, filed on May 21, 2025
D.	Citation issued to State Farm Lloyds with Proof of Service by Certified Mail on May 30, 2025
E.	State Farm Lloyds' Original Answer filed on June 20, 2025
F.	Certified Copies of the Certificate of Formation and Public Information Report for Plaintiff DFWS, LLC
G.	Affidavit of Brant Kaufmann
H.	List of Counsel of Record

Respectfully submitted,

**FLETCHER, FARLEY
SHIPMAN & SALINAS, LLP**

BY: /s/ Kristi L. Kautz
KRISTI L. KAUTZ

State Bar No. 24060069

Email: kristi.kautz@fletcherfarley.com

GLORIA J. SOLORZANO

State Bar No. 24138243

Email: gloria.solorzano@fletcherfarley.com

9201 N. Central Expressway, Suite 600

Dallas, Texas 75231

(214) 987-9600 (office)

(214) 987-9866 (telecopier)

**ATTORNEYS FOR DEFENDANT
STATE FARM LLOYDS**

CERTIFICATE OF SERVICE

I hereby certify that the foregoing instrument was electronically filed via the Court's CM/ECF system and a true and correct copy of same was delivered to all counsel of record in accordance with the FEDERAL RULES OF CIVIL PROCEDURE on this the 26th day of June 2025.

/s/Kristi L. Kautz

KRISTI L. KAUTZ

EXHIBIT B

Case Information

DC-25-08032 | DFWS, LLC vs. STATE FARM LLOYDS

Case Number	Court	Judicial Officer
DC-25-08032	162nd District Court	PHIPPS, KIM
File Date	Case Type	Case Status
05/21/2025	OTHER (CIVIL)	OPEN

Party

PLAINTIFF
DFWS, LLC

Active Attorneys ▼
Lead Attorney
HOCH, TIMOTHY MICHAEL
Retained

DEFENDANT
STATE FARM LLOYDS

Active Attorneys ▼
Lead Attorney
KAUTZ, KRISTI LYNNE
Retained

Events and Hearings

05/21/2025 NEW CASE FILED (OCA) - CIVIL
05/21/2025 ORIGINAL PETITION ▼ PLAINTIFF'S ORIGINAL PETITION
05/23/2025 ISSUE CITATION ▼ ISSUE CITATION-STATE FARM LLOYDS
05/27/2025 CITATION ▼ Unserviced Anticipated Server CERTIFIED MAIL Anticipated Method Comment STATE FARM LLOYDS 9214 8901 0661 5400 0207 7745 33
06/20/2025 ORIGINAL ANSWER - GENERAL DENIAL ▼ ORIGINAL ANSWER

Financial

DFWS, LLC				
Total Financial Assessment				\$444.00
Total Payments and Credits				\$444.00
5/23/2025	Transaction Assessment			\$444.00
5/23/2025	CREDIT CARD - TEXFILE (DC)	Receipt # 35466-2025-DCLK	DFWS, LLC	(\$307.00)
5/23/2025	STATE CREDIT			(\$137.00)

Documents

PLAINTIFF'S ORIGINAL PETITION

ISSUE CITATION-STATE FARM LLOYDS

ORIGINAL ANSWER

EXHIBIT C

CAUSE NO. DC-25-08032

DFWS, LLC	§	IN THE DISTRICT COURT
Plaintiff	§	
v.	§	162nd
	§	JUDICIAL DISTRICT
STATE FARM LLOYDS,	§	
Defendant	§	DALLAS COUNTY, TEXAS

PLAINTIFF'S ORIGINAL PETITION

TO THE HONORABLE JUDGE OF SAID COURT:

COMES NOW, DFWS, LLC ("Plaintiff") and files this petition against Defendant State Farm Lloyds and would show the court as follows:

**I.
PARTIES**

1. DFWS, LLC ("Plaintiff") is a Texas Limited Liability Company with a principal place of business in Dallas, County, Texas.

2. State Farm Lloyds ("State Farm") is a foreign insurance carrier registered with the Texas Department of Insurance engaging in the business of insurance in the State of Texas. State Farm Lloyds can be served as follows: Corporation Service Company, 211 E. 7th Street, Suite 620, Austin, Texas 78701-3218.

II.**JURISDICTION AND VENUE**

3. The Court has jurisdiction over this cause of action because the amount in controversy is within the jurisdictional limits of the Court. Plaintiff is domiciled in Dallas County, Texas and the

property made the basis of this lawsuit occurred in Dallas County, Texas. Plaintiff sues for monetary relief in excess of \$1 million.

III.

FACTUAL BACKGROUND

4. Plaintiff is a Texas Limited Liability Company that owns and manages an apartment complex located at 4821 Gaston Avenue, Dallas, Texas 75246 (the “Property”).

5. The Property was insured by Defendant under Texas Policy No. 90GWM8809 (the “Policy”) which was in effect during all periods relevant hereto.

6. On May 27, 2024, a wind and hailstorm caused significant and devastating damage to the Property. Upon discovering the damage, Plaintiff immediately notified Defendant.

7. From the outset Defendant engaged in a pattern of acts and omissions to purposefully and willfully deny benefits that were owed to Defendant as a result of the loss. By letter dated January 15, 2025, Defendant sent a letter to Plaintiff which stated:

- *It is questionable whether you have complied with the conditions of your policy relative to prompt notification*
- *It is questionable whether you have complied with the conditions of your policy relative to exhibiting the damaged property.*

8. These conclusory statements offered no additional detail or explanation, leaving Plaintiff to guess as to the basis for Defendant’s denial. The January 15, 2025 letter quoted some unspecified “Duties In The Event Of Loss” from the Policy; however, the letter failed to offer any further details on how these “duties” impacted the coverage decision. Ultimately, Plaintiff was

given no coverage decision that offered any coherent reasons for Defendant's decision. This is textbook bad faith.

9. Defendant has been repeatedly provided with information sufficient to provide coverage and pay Plaintiff a reasonable and necessary amount for their covered loss. Nonetheless, Defendant continues to deny the full extent of Plaintiff's damage without any reasonable basis or explanation for the denial. By letter dated March 19, 2025, Plaintiff put Defendant on notice of Plaintiff's intent to seek damages pursuant to Texas Insurance Code §§541, 542 and 542A.

10. Plaintiff's Property was damaged and continues to be damaged due to Defendant's breach of the Policy and Defendant's bad faith. In addition, Defendant failed to abide by the deadlines imposed by the Texas Insurance Code with regard to the prompt payment of claims as more fully set forth below.

IV.

FIRST CAUSE OF ACTION-BREACH OF CONTRACT

11. Plaintiff contracted with Defendant for property and casualty insurance on the Property made the basis of this lawsuit. As part of the contract for insurance, Plaintiff paid the Defendant premiums as required under the terms of the Policy. Defendant agreed to pay for direct physical loss of or damage to Covered Property at the premises described in the Declarations caused by or resulting in a Covered Cause of Loss. The damage to the Plaintiff's Property was the type covered by the contract for insurance.

12. Defendant breached the contract for insurance in one or more of the following ways:

- (a) Failing to pay full benefits due in a timely manner in accordance with the terms of the Policy;

- (b) Failing to provide a reasonable explanation of the basis for denying the claim; and
- (c) Failing to promptly and equitably pay the claim once liability had become reasonably clear.

13. This breach of contract by the Defendant is a proximate cause of the damages suffered and to be suffered in the future by Plaintiff, for which Plaintiff now sues.

V.

SECOND CAUSE OF ACTION-BREACH OF GOOD FAITH AND FAIR DEALING

14. From and after the time the Plaintiff's claim was presented to Defendant, Defendant's liability to pay the claim in accordance with the terms of the Policy was reasonably clear. Despite there being no basis on which a reasonable insurance company would have relied to deny payment of Plaintiff's claim, Defendant refused to accept the claim and pay Plaintiff.

15. At that time, Defendant knew or should have known by the exercise of reasonable diligence that its liability was reasonably clear. In this regard, Plaintiff will show that Defendant failed to conduct a reasonable, proper investigation of the claim and refused to rely on the true facts, resorting instead to producing faulty, incomplete, and biased reasons as subterfuges to avoid paying or partially paying a valid claim.

16. Consequently, Defendant breached its duty to deal fairly and in good faith with the Plaintiff. Defendant's breach was a proximate cause of the losses, expenses, and damages suffered by the Plaintiff as more specifically described below. These losses include a separate and distinct measure of damages which would not have been incurred but for the Bad Faith committed by Defendant.

17. Plaintiff seeks exemplary damages in an amount to be assessed by the trier of fact caused by Defendant's bad faith.

VI.

**THIRD CAUSE OF ACTION-
DECEPTIVE TRADE PRACTICES**

18. Plaintiff would show that Defendant engaged in certain false, misleading and deceptive acts, practices and/or omissions actionable under the Texas Deceptive Trade Practices - Consumer Protection Act (Texas Business and Commerce Code, Chapter 17.41, et seq.), as alleged herein below.

19. Violations of Section 17.46(b). Defendant violated Section 17.46(b) of the Texas Business and Commerce Code. Specifically, Defendant:

(a) represented that goods or services have sponsorship, approval, characteristics, ingredients, uses, benefits, or quantities which they do not have;

(b) represented that goods or services were of a particular standard, quality, or grade, or that goods were of a particular style or model, if they are of another;

(c) represented that an agreement confers or involves rights, remedies, or obligations which it does not have or involve, or which are prohibited by law.

(d) failed to disclose information concerning goods or services which was known at the time of the transaction when such failure to disclose such information was intended to induce the consumer into a transaction into which the consumer would not have entered had the information been disclosed.

20. Unconscionable Action or Course of Action. Defendant engaged in an "unconscionable action or course of action" to the detriment of Plaintiff as that term is defined by Section 17.45(5) of the Texas Business and Commerce Code, by taking advantage of the lack of knowledge, ability, experience, or capacity of Plaintiff to a grossly unfair degree.

VII.

FOURTH CAUSE OF ACTION VIOLATIONS OF THE TEXAS INSURANCE CODE SECTION 541

21. Defendant engaged in unfair claim settlement practices prohibited by Section 541.060 of the Texas Insurance Code. Specifically, Defendant:

- (a) misrepresented to Plaintiff a material fact or policy provision relating to coverage at issue;
- (b) failed to attempt in good faith to effectuate a prompt, fair, and equitable settlement of Plaintiff's claim even though Defendant's liability had become reasonably clear; and/or
- (c) failed to promptly provide to Plaintiff a reasonable explanation of the basis in the policy, in relation to the facts or applicable law, for the Defendant's denial of a claim or offer of a compromise settlement of a claim.
- (d) refused to pay Plaintiff's claim without conducting a reasonable investigation with respect to the claim.

22. Plaintiff would show that the acts, practices and/or omissions complained of were the producing cause of Plaintiff's damages more fully described herein below.

23. Plaintiff would further show the acts, practices and/or omissions complained of under Section 17.46(b) of the Texas Business and Commerce Code and Chapter 541 of the Texas Insurance Code were relied upon by Plaintiff to Plaintiff's detriment.

VIII.

FIFTH CAUSE OF ACTION VIOLATIONS OF TEXAS INSURANCE CODE SECTION 542

24. Plaintiff incorporates the foregoing paragraphs as if fully rewritten herein.

25. Defendant violated Section 542 of the Texas Insurance Code as follows:

a. Defendant failed to timely acknowledge receipt of Plaintiff's claim (Section 542.055(a)(1));

b. Defendant failed to timely commence an investigation into the claim or to request from Plaintiff any additional items, statements, or forms that Defendant reasonably believed to be required from Plaintiff (Section 542.055(a)(2)-(3))

c. Defendant failed to notify Plaintiff in writing of the acceptance or rejection of the claim not later than the 15th business day after receipt of all items, statements and forms required by

Defendant (Section 542.056(a));

d. Defendant delayed payment of Plaintiff's claim in violation of Texas Insurance Code Section 542.058(a).

26. Each of the acts above were done knowingly and were a producing cause of Plaintiff's damages. In addition, Defendant is liable for statutory interest penalties and attorney's fees under Texas Insurance Code Section 542.060.

IX.

DISCOVERY

27. Pursuant to Tex.R.Civ.P. 194, Defendant is requested to disclose within fifty (50) days of service of this request, the information or material described in Tex.R.Civ.P. 194.2.

X.

CONDITIONS PRECEDENT

28. By letter dated March 19, 2025, Plaintiff gave Notice as required under the Texas Deceptive Trade Practices Act (Texas Business & Commerce Code Section 17.45 et seq) and the Texas Insurance Code Sections 541 and 542 et seq. All other conditions precedent to filing suit have been met, including Plaintiff's payment of the insurance premium to Defendant.

XI.

AMBIGUITY

29. The Policy in place at the time of the events made the basis of this suit contained patent and latent ambiguities concerning the terms of the policy. In addition, the Policy contained patent and latent ambiguities concerning the terms of the Policy governing the Plaintiff's duties after a loss.

XII.

WAIVER AND ESTOPPEL

30. Defendant has waived or is estopped from asserting any coverage defenses, conditions, exclusions or exceptions to coverage not contained in any reservation of rights letter to Plaintiff.

XIII.

AGENCY

31. At and during the time of the acts and/or omissions complained of herein, any acts and/or omissions committed by an agent, representative or employee of Defendant, occurred within the scope of the actual or apparent authority of such person on behalf of said Defendant.

32. Said Defendant is therefore liable to Plaintiff for the acts and/or omissions of any such agent, representative or employee complained of herein by virtue of such agency relationship.

XIV.

JURY DEMAND

33. Plaintiff demands a jury trial and tenders the appropriate fee with this Petition.

XV.

PRAYER

34. For these reasons, Plaintiff asks that Defendant be cited to appear and answer, and that upon final trial, Plaintiff have judgment against Defendant for:

- (a) Actual damages;
- (b) Reasonable and necessary attorney's fees;
- (c) Extra-contractual damages for Defendant's violations of the Texas Insurance Code and the Texas Deceptive Trade Practices Act including exemplary and punitive damages for knowing violations:

- (d) Pre-judgment and post-judgment interest as allowed by law;
- (e) Costs of court;
- (f) All other relief, at law or in equity, to which Plaintiff may be entitled.

Respectfully submitted,

/s/Timothy M. Hoch

Timothy M. Hoch

Texas Bar No. 09744950

tim@hochlawfirm.com

HOCH LAW FIRM, P.C.

5616 Malvey Avenue

Fort Worth, Texas 76107

(817)731-9703

(817)731-9706 -- facsimile

Automated Certificate of eService

This automated certificate of service was created by the eFiling system. The filer served this document via email generated by the eFiling system on the date and to the persons listed below. The rules governing certificates of service have not changed. Filers must still provide a certificate of service that complies with all applicable rules.

Lynn Dunavin on behalf of Tim Hoch
Bar No. 9744950
lynndunavin@yahoo.com
Envelope ID: 101110900
Filing Code Description: Original Petition
Filing Description:
Status as of 5/23/2025 10:06 AM CST

Case Contacts

Name	BarNumber	Email	TimestampSubmitted'	Status
Lynn S.Dunavin		lynn@hochlawfirm.com	5/21/2025 1:21:51 PM	SENT
Tim Hoch		tim@hochlawfirm.com	5/21/2025 1:21:51 PM	SENT

CERTIFIED MAIL

50

US POSTAGE



ZIP 75202 \$016.62⁰
02 4W
0000384306 MAY 28 2025

SHOW TO WHOM
DELIVERED, Date &
Addressee's
Address

Deliver to
Addressee
ONLY

RESTRICTED DELIVERY
DELIVER TO ADDRESSEE ONLY

78701-321870



EXHIBIT D



KSB / ALL

Transmittal Number: 31526335
Date Processed: 05/30/2025

Notice of Service of Process

Primary Contact: State Farm Enterprise SOP
Corporation Service Company- Wilmington, DELAWARE
251 Little Falls Dr
Wilmington, DE 19808-1674

Entity:	State Farm Lloyds Entity ID Number 3461674
Entity Served:	State Farm Lloyds
Title of Action:	DFWS, LLC vs. State Farm Lloyds
Matter Name/ID:	DFWS, LLC vs. State Farm Lloyds (17391433)
Document(s) Type:	Citation/Petition
Nature of Action:	Contract
Court/Agency:	Dallas County District Court, TX
Case/Reference No:	DC-25-08032
Jurisdiction Served:	Texas
Date Served on CSC:	05/30/2025
Answer or Appearance Due:	10:00 am Monday next following the expiration of 20 days after service
Originally Served On:	CSC
How Served:	Certified Mail
Sender Information:	Hoch Law Firm, P.C. 817-731-9703

Information contained on this transmittal form is for record keeping, notification and forwarding the attached document(s). It does not constitute a legal opinion. The recipient is responsible for interpreting the documents and taking appropriate action.

To avoid potential delay, please do not send your response to CSC

251 Little Falls Drive, Wilmington, Delaware 19808-1674 (888) 690-2882 | sop@cscglobal.com

FELICIA PITRE
DISTRICT CLERK
600 COMMERCE ST
DALLAS, TX 75202-4606



9214 8901 0661 5400 0207 7745 33

RETURN RECEIPT (ELECTRONIC)

DC-25-08032/AT

STATE FARM LLOYDS
BY SERVING ITS REGISTERED AGENT CORPORATION
SERVICE COMPANY
211 E 7TH ST STE 620
AUSTIN, TX 78701-3218

CUT / FOLD HERE

Zone 3

6"x9" ENVELOPE
CUT / FOLD HERE

CUT / FOLD HERE

THE STATE OF TEXAS

To: **STATE FARM LLOYDS**
BY SERVING ITS REGISTERED AGENT CORPORATION SERVICE COMPANY
211 E 7TH STREET SUITE 620
AUSTIN TX 78701-3218

GREETINGS:

You have been sued. You may employ an attorney. If you or your attorney do not file a written answer with the clerk who issued this citation by 10 o'clock a.m. on the Monday next following the expiration of twenty days after you were served this citation and **ORIGINAL** petition, a default judgment may be taken against you. In addition to filing a written answer with the clerk, you may be required to make initial disclosures to the other parties of this suit. These disclosures generally must be made no later than 30 days after you file your answer with the clerk. Find out more at TexasLawHelp.org. Your answer should be addressed to the clerk of the **162nd District Court** at 600 Commerce Street, Dallas, Texas 75202.

Said Plaintiff being **DFWS, LLC**

Filed in said Court **21st day of May, 2025** against


STATE FARM LLOYDS

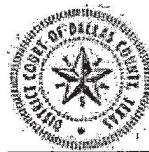
For Suit, said suit being numbered **DC-25-08032**, the nature of which demand is as follows:
Suit on **OTHER (CIVIL)** etc. as shown on said petition, a copy of which accompanies this citation. If this citation is not served, it shall be returned unexecuted.

WITNESS: FELICIA PITRE, Clerk of the District Courts of Dallas, County Texas.

Given under my hand and the Seal of said Court at office **on this the 27th day of May, 2025**

ATTEST: FELICIA PITRE,
Clerk of the District Courts of Dallas County, Texas

By , Deputy
ALICE TORRES

**CERTIFIED MAIL**
CITATION

No.: **DC-25-08032**

DFWS, LLC
vs.
STATE FARM LLOYDS

ISSUED
on this the 27th day of May, 2025

FELICIA PITRE
Clerk District Courts,
Dallas County, Texas

By: **ALICE TORRES**, Deputy

Attorney for Plaintiff
TIMOTHY M. HOCH
5616 MALVEY AVE
FORT WORTH TX 76107-5121
(817) 731-9703
tim@hochlawfirm.com

DALLAS COUNTY
SERVICE FEES PAID

OFFICER'S RETURN

Cause No. DC-25-08032

Court No.: 162nd District Court

Style: DFWS, LLC

vs.

STATE FARM LLOYDS

Came to hand on the _____ day of _____, 20_____, at _____ o'clock _____ .M.

Executed at _____, within the County of _____ at _____

o'clock _____ .M. on the _____ day of _____, 20_____, by delivering to the within named

each, in person, a true copy of this Citation together with the accompanying copy of this pleading, having first endorsed on same date of delivery. The distance actually traveled by me in serving such process was _____ miles and my fees are as follows: To certify which witness my hand.

For serving Citation \$ _____

For mileage \$ _____ of _____ County, _____

For Notary \$ _____ By _____ Deputy

(Must be verified if served outside the State of Texas.)

Signed and sworn to by the said _____ before me this _____ day of _____,

20_____, to certify which witness my hand and seal of office.

Notary Public _____ County _____

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AUSTIN, TX 78701

May 30, 2025, 5:05 am

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Feedback

Text & Email Updates



Return Receipt Electronic



USPS Tracking Plus®



Product Information



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Enter tracking or barcode numbers

Need More Help?

Contact USPS Tracking support for further assistance.

FAQs

EXHIBIT E

SFC.29372

CAUSE NO. DC-25-08032

DFWS, LLC,

Plaintiff,

V.

STATE FARM LLOYDS,

Defendant.

§ § § § §

IN THE DISTRICT COURT

162nd JUDICIAL DISTRICT

DALLAS COUNTY, TEXAS

DEFENDANT STATE FARM LLOYDS' ORIGINAL ANSWER

Comes now Defendant State Farm Lloyds (“State Farm”) and files its Original Answer to Plaintiff’s original petition and any pleading which may be filed thereafter and respectfully asserts as follows:

I. GENERAL DENIAL

State Farm asserts a general denial, as authorized by Rule 92 of the Texas Rules of Civil Procedure and respectfully requests that the Court and the jury require Plaintiff to prove its claims, charges, and allegations by a preponderance of the evidence, as required by the constitution and laws of the State of Texas.

Respectfully submitted,

**FLETCHER, FARLEY, SHIPMAN &
SALINAS, L.L.P.**

/s/Kristi L. Kautz

KRISTI L. KAUTZ

State Bar No. 24060069

Email: kristi.kautz@fletcherfarley.com

GLORIA J. SOLORZANO

State Bar No. 24138243

gloria.solorzano@fletcherfarley.com

9201 N. Central Expressway, Suite 600

Dallas, Texas 75231

(214) 987-9600 (office)

(214) 987-9866 (telecopier)

**ATTORNEYS FOR DEFENDANT STATE
FARM LLOYDS**

CERTIFICATE OF SERVICE

This is to certify that a true and correct copy of the foregoing instrument has been electronically served to all counsel of record in compliance with Rule 21a. of the TEXAS RULES OF CIVIL PROCEDURE on this the 20th day of June, 2025.

/s/Kristi L. Kautz

KRISTI L. KAUTZ

Automated Certificate of eService

This automated certificate of service was created by the eFiling system. The filer served this document via email generated by the eFiling system on the date and to the persons listed below. The rules governing certificates of service have not changed. Filers must still provide a certificate of service that complies with all applicable rules.

Sidney Medrano on behalf of Kristi Kautz
Bar No. 24060069
sidney.medrano@fletcherfarley.com
Envelope ID: 102244247
Filing Code Description: Original Answer - General Denial
Filing Description:
Status as of 6/25/2025 11:51 AM CST

Case Contacts

Name	BarNumber	Email	TimestampSubmitted	Status
Lynn S.Dunavin		lynn@hochlawfirm.com	6/20/2025 12:54:57 PM	SENT
Tim Hoch		tim@hochlawfirm.com	6/20/2025 12:54:57 PM	SENT
Kristi Kautz		kristi.kautz@fletcherfarley.com	6/20/2025 12:54:57 PM	SENT
Gloria Solorzano		gloria.solorzano@fletcherfarley.com	6/20/2025 12:54:57 PM	SENT
Conor Austin		conor.austin@fletcherfarley.com	6/20/2025 12:54:57 PM	SENT

EXHIBIT F



Office of the Secretary of State

The undersigned, as Secretary of State of Texas, does hereby certify that the attached is a true and correct copy of each document on file in this office as described below:

DFWS LLC
Filing Number: 802491622

Certificate of Formation
Public Information Report (PIR)
Public Information Report (PIR)


June 23, 2016
December 31, 2023
December 31, 2024

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on June 20, 2025.



A handwritten signature in black ink that reads "Jane Nelson".

Jane Nelson
Secretary of State

Form 205 (Revised 05/11) Submit in duplicate to: Secretary of State P.O. Box 13697 Austin, TX 78711-3697 512 463-5555 FAX: 512 463-5709 Filing Fee: \$300	 Certificate of Formation Limited Liability Company	This space reserved for office use. <div style="text-align: center;"> FILED In the Office of the Secretary of State of Texas JUN 23 2016 Corporations Section </div>
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Article 1 – Entity Name and Type

The filing entity being formed is a limited liability company. The name of the entity is:

DFWS LLC

The name must contain the words "limited liability company," "limited company," or an abbreviation of one of these phrases.

Article 2 – Registered Agent and Registered Office

(See instructions. Select and complete either A or B and complete C.)

☒ A. The initial registered agent is an organization (cannot be entity named above) by the name of:

HARRELL PAILET & ASSOCIATES, P.C.

OR

☐ B. The initial registered agent is an individual resident of the state whose name is set forth below:

<i>First Name</i>	<i>M.I.</i>	<i>Last Name</i>	<i>Suffix</i>
-------------------	-------------	------------------	---------------

C. The business address of the registered agent and the registered office address is:

5454 LA SIERRA DRIVE, STE. 100	DALLAS	TX	75231
<i>Street Address</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>

Article 3—Governing Authority

(Select and complete either A or B and provide the name and address of each governing person.)

☒ A. The limited liability company will have managers. The name and address of each initial manager are set forth below.

☐ B. The limited liability company will not have managers. The company will be governed by its members, and the name and address of each initial member are set forth below.

GOVERNING PERSON 1				
NAME (Enter the name of either an individual or an organization, but not both.)				
IF INDIVIDUAL				
FRANK		HOUNG		
<i>First Name</i>	<i>M.I.</i>	<i>Last Name</i>	<i>Suffix</i>	
OR				
IF ORGANIZATION				
Organization Name				
ADDRESS				
5455 VINE STREET	CHINO	CA	USA	91710
<i>Street or Mailing Address</i>	<i>City</i>	<i>State</i>	<i>Country</i>	<i>Zip Code</i>

GOVERNING PERSON 2				
NAME (Enter the name of either an individual or an organization, but not both.)				
IF INDIVIDUAL				
HUEI FEN		WANG		
<i>First Name</i>	<i>M.I.</i>	<i>Last Name</i>	<i>Suffix</i>	
OR				
IF ORGANIZATION				
<i>Organization Name</i>				
ADDRESS				
5455 VINE STREET	CHINO	CA	USA	91710
<i>Street or Mailing Address</i>	<i>City</i>	<i>State</i>	<i>Country</i>	<i>Zip Code</i>

GOVERNING PERSON 3				
NAME (Enter the name of either an individual or an organization, but not both.)				
IF INDIVIDUAL				
CHING FANG		WANG		
<i>First Name</i>	<i>M.I.</i>	<i>Last Name</i>	<i>Suffix</i>	
OR				
IF ORGANIZATION				
<i>Organization Name</i>				
ADDRESS				
5455 VINE STREET	CHINO	CA	USA	91710
<i>Street or Mailing Address</i>	<i>City</i>	<i>State</i>	<i>Country</i>	<i>Zip Code</i>

Article 4 – Purpose

The purpose for which the company is formed is for the transaction of any and all lawful purposes for which a limited liability company may be organized under the Texas Business Organizations Code.

Supplemental Provisions/Information

Text Area: [The attached addendum, if any, is incorporated herein by reference.]

--

Organizer

The name and address of the organizer:

HARRELL PAILET & ASSOCIATES, P.C.

Name

5454 LA SIERRA DRIVE, STE. 100

Street or Mailing Address

DALLAS

City

TX 75231

State Zip Code

Effectiveness of Filing (Select either A, B, or C.)

A. ☒ This document becomes effective when the document is filed by the secretary of state.

B. ☐ This document becomes effective at a later date, which is not more than ninety (90) days from the date of signing. The delayed effective date is: _____

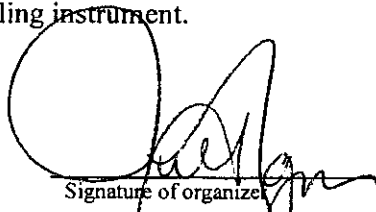
C. ☐ This document takes effect upon the occurrence of the future event or fact, other than the passage of time. The 90th day after the date of signing is: _____

The following event or fact will cause the document to take effect in the manner described below:

Execution

The undersigned affirms that the person designated as registered agent has consented to the appointment. The undersigned signs this document subject to the penalties imposed by law for the submission of a materially false or fraudulent instrument and certifies under penalty of perjury that the undersigned is authorized to execute the filing instrument.

Date: JUNE 23, 2016



Signature of organizer

JULIANNE NGUYEN
HARRELL PAILET & ASSOCIATES, P.C.
5454 LA SIERRA DRIVE, STE. 100
DALLAS, TX 75231

Printed or typed name of organizer

Texas Franchise Tax Public Information Report

Comptroller of Public Accounts
FORM 05-102
(Rev. 9-11/30)

To be filed by Corporations, Limited Liability Companies (LLC) and Financial Institutions

This report MUST be signed and filed to satisfy franchise tax requirements

Tcode 13196 Franchise

Taxpayer number

3 2 0 6 0 9 2 3 0 7 8

Report year

2 0 2 3

You have certain rights under Chapter 552 and 559, Government Code, to review, request, and correct information we have on file about you. Contact us at (800) 252-1381 or (512) 463-4600.

Taxpayer name

DFWS LLC

Mailing address

1541 UNISON WAY UNIT 102

Secretary of State (SOS) file number or
Comptroller file number

City

LAS VEGAS

State

NV

ZIP Code

89135

Plus 4

0802491622

Blacken circle if there are currently no changes from previous year; if no information is displayed, complete the applicable information in Sections A, B and C.

Principal office

1541 UNISON WAY UNIT 102, LAS VEGAS, NV 89135

Principal place of business

1541 UNISON WAY UNIT 102, LAS VEGAS, NV 89135

Please sign below!

Officer, director and manager information is reported as of the date a Public Information Report is completed. The information is updated annually as part of the franchise tax report. There is no requirement or procedure for supplementing the information as officers, directors, or managers change throughout the year.



3206092307823

SECTION A Name, title and mailing address of each officer, director or manager.

Name HUEI FEN WANG	Title MANAGER	Director <input type="radio"/> YES	Term expiration m m d d y y <input type="text"/>
Mailing address 1541 UNISON WAY UNIT 102	City LAS VEGAS	State NV	ZIP Code 89135
Name FRANK HOUNG	Title MANAGER	Director <input type="radio"/> YES	Term expiration m m d d y y <input type="text"/>
Mailing address 1541 UNISON WAY UNIT 102	City LAS VEGAS	State NV	ZIP Code 89135
Name	Title	Director <input type="radio"/> YES	Term expiration m m d d y y <input type="text"/>
Mailing address	City	State	ZIP Code

SECTION B Enter the information required for each corporation or LLC, if any, in which this entity owns an interest of 10 percent or more.

Name of owned (subsidiary) corporation or limited liability company	State of formation	Texas SOS file number, if any	Percentage of ownership
Name of owned (subsidiary) corporation or limited liability company	State of formation	Texas SOS file number, if any	Percentage of ownership

SECTION C Enter the information required for each corporation or LLC, if any, that owns an interest of 10 percent or more in this entity or limited liability company.

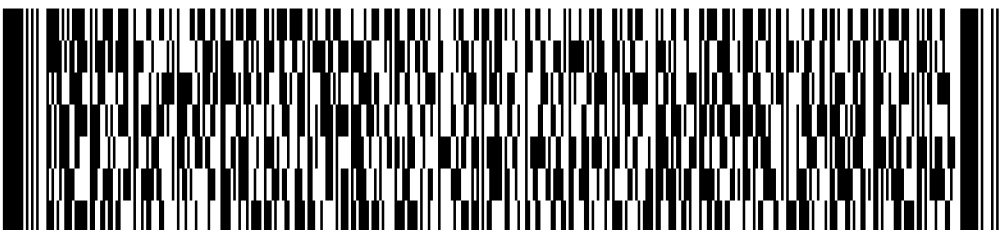
Name of owned (parent) corporation or limited liability company DENISTEIN LLC	State of formation DELAWARE	Texas SOS file number, if any	Percentage of ownership 100.0
Registered agent and registered office currently on file. (see instructions if you need to make changes)			
Agent: DAVID GLAZER			
Office: 13747 MONTFORT DRIVE, SUITE 350	City DALLAS	State TX	ZIP Code 75240

The above information is required by Section 171.203 of the Tax Code for each corporation or limited liability company that files a Texas Franchise Tax Report. Use additional sheets for Sections A, B, and C, if necessary. The information will be available for public inspection.

I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief, as of the date below, and that a copy of this report has been mailed to each person named in this report who is an officer, director or manager and who is not currently employed by this, or a related, corporation or limited liability company.

sign here JEAN N BLAYLOCK-GASKILL	Title Electronic	Date 11-08-2023	Area code and phone number () -
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Texas Comptroller Official Use Only



VE/DE	<input type="radio"/>	PIR IND	<input type="radio"/>
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05-102
(Rev.9-15/33)**Texas Franchise Tax Public Information Report**To be filed by Corporations, Limited Liability Companies (LLC), Limited Partnerships (LP),
Professional Associations (PA) and Financial Institutions

■ Tcode 13196 Franchise

■ Taxpayer number

■ Report year

3 2 0 6 0 9 2 3 0 7 8

2 0 2 4

You have certain rights under Chapter 552 and 559,
Government Code, to review, request and correct information
we have on file about you. Contact us at 1-800-252-1381.

Taxpayer name

DFWS LLC

■ ☐ Blacken circle if the mailing address has changed.

Mailing address

1541 UNISON WAY 102

Secretary of State (SOS) file number or
Comptroller file number

City

LAS VEGAS

State

NV

ZIP code plus 4

89135

0802491622

● Blacken circle if there are currently no changes from previous year; if no information is displayed, complete the applicable information in Sections A, B and C.

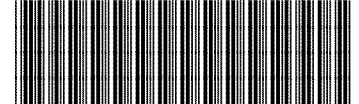
Principal office

1541 UNISON WAY 102, LAS VEGAS, NV, 89135

Principal place of business

1541 UNISON WAY 102, LAS VEGAS, NV, 89135

You must report officer, director, member, general partner and manager information as of the date you complete this report.



1000000000015

Please sign below!**This report must be signed to satisfy franchise tax requirements.****SECTION A** Name, title and mailing address of each officer, director, member, general partner or manager.

Name HUEI FEN WANG	Title MANAGER	Director <input type="radio"/> YES	Term expiration <table><tr><td>m</td><td>m</td><td>d</td><td>d</td><td>y</td><td>y</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>	m	m	d	d	y	y						
m	m	d	d	y	y										
Mailing address 1541 UNISON WAY 102	City LAS VEGAS	State NV	ZIP Code 89135												
Name FRANK HOUNG	Title MANAGER	Director <input type="radio"/> YES	Term expiration <table><tr><td>m</td><td>m</td><td>d</td><td>d</td><td>y</td><td>y</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>	m	m	d	d	y	y						
m	m	d	d	y	y										
Mailing address 1541 UNISON WAY 102	City LAS VEGAS	State NV	ZIP Code 89135												
Name	Title	Director <input type="radio"/> YES	Term expiration <table><tr><td>m</td><td>m</td><td>d</td><td>d</td><td>y</td><td>y</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>	m	m	d	d	y	y						
m	m	d	d	y	y										
Mailing address	City	State	ZIP Code												

SECTION B Enter information for each corporation, LLC, LP, PA or financial institution, if any, in which this entity owns an interest of 10 percent or more.

Name of owned (subsidiary) corporation, LLC, LP, PA or financial institution	State of formation	Texas SOS file number, if any	Percentage of ownership
Name of owned (subsidiary) corporation, LLC, LP, PA or financial institution	State of formation	Texas SOS file number, if any	Percentage of ownership

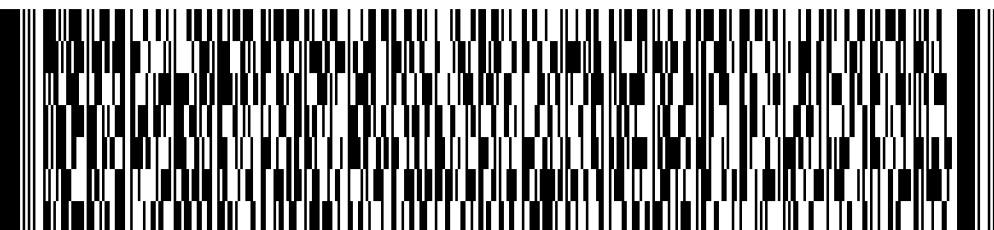
SECTION C Enter information for each corporation, LLC, LP, PA or financial institution, if any, that owns an interest of 10 percent or more in this entity.

Name of owned (parent) corporation, LLC, LP, PA or financial institution DENISTEIN LLC	State of formation DE	Texas SOS file number, if any	Percentage of ownership 100.000
Registered agent and registered office currently on file (see instructions if you need to make changes) Agent: CLAUDIA CASTRO		You must make a filing with the Secretary of State to change registered agent, registered office or general partner information.	
Office: 7306 KINGSTON DR	City ROWLETT	State TX	ZIP Code 75089

The information on this form is required by Section 171.203 of the Tax Code for each corporation, LLC, LP, PA or financial institution that files a Texas Franchise Tax Report. Use additional sheets for Sections A, B and C, if necessary. The information will be available for public inspection.

I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief, as of the date below, and that a copy of this report has been mailed to each person named in this report who is an officer, director, member, general partner or manager and who is not currently employed by this or a related corporation, LLC, LP, PA or financial institution.

sign here HUEI FEN WANG	Title Member	Date 05/07/2024	Area code and phone number (909) 993 - 7391
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Texas Comptroller Official Use Only

VE/DE	<input type="radio"/>	PIR IND	<input type="radio"/>
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EXHIBIT G

SFC. 29372

IN THE UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF TEXAS
DALLAS DIVISION

DFWS, LLC,

Plaintiff,

v.

STATE FARM LLOYDS,

Defendant.

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CIVIL ACTION NO.

AFFIDAVIT OF BRANT KAUFMANN

This day appeared before me, the undersigned authority, BRANT KAUFMANN, who after being duly sworn, deposed and stated as follows:

1. "My name is Brant Kaufmann. I am over the age of 18, I have never been convicted of a felony or crime involving moral turpitude, and I am otherwise competent to make this affidavit.

2. I am an Assistant Secretary - Treasurer of State Farm Lloyds, Inc. ("Lloyds, Inc."), attorney-in-fact for State Farm Lloyds. I am also a Finance Director for State Farm Mutual Automobile Insurance Company ("State Farm Mutual"). My business address is One State Farm Plaza, Bloomington, Illinois 61710-0001.

3. As part of my job duties for State Farm Mutual, I have access to and personal knowledge of the records of the department that prepares and files the Annual Statements and similar filings for State Farm Mutual and each of its property and casualty insurance subsidiaries and affiliates, including State Farm Lloyds.

4. State Farm Lloyds is an association of individual underwriters authorized to conduct business in Texas as a Lloyd's plan insurer as defined and set out in Chapter 941 of the Texas Insurance Code.

5. As a Lloyd's plan insurer, State Farm Lloyds has designated an attorney-in-fact as provided under Texas law. Lloyds Inc., a Texas business corporation, is the attorney-in-fact in Texas for State Farm Lloyds and, as such, Lloyds Inc. is the agent of State Farm Lloyds.

6. As an officer of these State Farm companies, I have knowledge of their respective directors, principal officers or underwriters, the type of entity each is, and other similar information. I have knowledge of the statements in this Affidavit pursuant to my duties in the above positions and they are true and correct.

7. On October 2, 2023, the Texas Department of Insurance notified State Farm Lloyds that its Amended Articles of Agreement dated June 19, 2023 had been placed on file and that its records had been updated to reflect the following changes to the underwriters: Sarah Mineau, Jonathan Allen Porwick, Andrew Glenn Rader, Sonya Johnson Robinson and Ronald Bradley Thein replaced Wensley John Herbert, Kenneth Edward Heidrich, Patricia Elizabeth Roark, Deon Sherie Johnson and Michele Celeste Russo.

The current underwriters for State Farm Lloyds are listed below:

- Mark Edward Schwamberger: Mr. Schwamberger is domiciled in Illinois. His residence and full time place of employment is in Illinois and he has expressed an intent to remain in Illinois while an Underwriter of State Farm Lloyds.
- Katinka Meijerink Bryson: Ms. Bryson is domiciled in Illinois. Her residence and full time place of employment is in Illinois and she has expressed an intent to remain in Illinois while an Underwriter of State Farm Lloyds.
- Kimberly Ann Sterling: Ms. Sterling is domiciled in Illinois. Her residence and full time place of employment is in Illinois and she has expressed an intent to remain in Illinois while an Underwriter of State Farm Lloyds.
- Justin Michael Tipsord: Mr. Tipsord is domiciled in Illinois. His residence and full time place of employment is in Illinois and he has expressed an intent to remain in Illinois while an Underwriter of State Farm Lloyds.
- Sara Gay Frankowiak: Ms. Frankowiak is domiciled in Illinois. Her residence and full time place of employment is in Illinois and she has expressed an intent to remain in Illinois while an Underwriter of State Farm Lloyds.
- Craig Dean Isaacs: Mr. Isaacs is domiciled in Illinois. His residence and full time place of employment is in Illinois and he has expressed an intent to remain in Illinois while an Underwriter of State Farm Lloyds.
- Sarah Mineau: Ms. Mineau is domiciled in Illinois. Her residence and full time place of employment is in Illinois and she has expressed an intent to remain in Illinois while an Underwriter of State Farm Lloyds.
- Jonathan Allen Porwick: Mr. Porwick is domiciled in Illinois. His residence and full time place of employment is in Illinois and he has expressed an intent to remain in Illinois while an Underwriter of State Farm Lloyds.
- Andrew Glenn Rader: Mr. Rader is domiciled in Illinois. His residence and full time place of employment is in Illinois and he has expressed an intent to remain in Illinois while an Underwriter of State Farm Lloyds.


- Sonya Johnson Robinson: Ms. Robinson is domiciled in Arizona. Her residence and full time place of employment are in Illinois and Arizona and she has expressed an intent to remain in Arizona while an Underwriter of State Farm Lloyds.
- Ronald Bradley Thein: Mr. Thein is domiciled in Illinois. His residence and full time place of employment is in Illinois and he has expressed an intent to remain in Illinois while an Underwriter of State Farm Lloyds.

8. At all times since the October 2, 2023 acceptance of the latest Amended Articles of Agreement by the Texas Department of Insurance, the above named underwriters have had their residences and full time places of employment in the States of Illinois and/or Arizona.

FURTHER AFFIANT SAYETH NAUGHT.”


BRANT KAUFMANN

SUBSCRIBED TO AND SWORN TO before me, the undersigned authority on this
the 25 day of June, 2025.


Notary Public for the State of Illinois

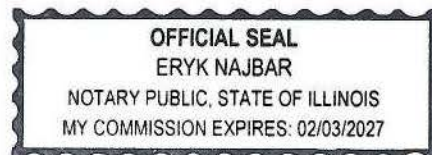


EXHIBIT H

SFC.29372

**IN THE UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF TEXAS
DALLAS DIVISION**

DFWS, LLC,

Plaintiff,

VS.

**STATE FARM LLOYDS,
Defendant.**

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CIVIL ACTION NO. _____

LIST OF COUNSEL OF RECORD

Counsel for Plaintiff:

Timothy M. Hoch
Texas Bar No. 09744950
Hoch Law Firm, P.C.
5616 Malvey Ave.
Fort Worth, Texas 76107
(817) 731-9703
(817) 731-9706 (facsimile)
tim@hochlawfirm.com

Counsel for Defendant:

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Gloria J. Solorzano
State Bar No. 24138243
Email: gloria.solorzano@fletcherfarley.com
Fletcher, Farley, Shipman & Salinas, LLP
9201 N. Central Expressway, Suite 600
Dallas, Texas 75231
(214) 987-9600 (office)
(214) 987-9866 (facsimile)